

Virginia Department of Medical Assistance Services (DMAS)

BabyCare Fact Sheet

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| Purpose: | The goal of the BabyCare Program is to address and correct two major barriers that negatively affect pregnancy and infant health outcomes: (1) fragmentation and lack of coordination in service delivery and, (2) lack of patient knowledge of and ability to successfully access the health care system. |
| What will this program offer? | <p>The BabyCare program includes two components:</p> <ul style="list-style-type: none"> • Care coordination for pregnant women and infants up to age two who are identified as high-risk and • Expanded prenatal services for pregnant women including patient education classes, nutritional services, homemaker services and substance abuse treatment services (SATS). |
| Who is Eligible? | <p>Care coordination is available for pregnant women and infants up to age two who are identified as high-risk (Maternal and Infant Care Coordination – MICC) and are eligible for Fee for Service (FFS) Medicaid, FFS FAMIS, or FAMIS Moms. Medicaid Managed Care Organizations (MCOs) have their own high risk maternity and infant programs.</p> <p>Expanded prenatal services, except for Substance Abuse Treatment Services (SATS), are available to any pregnant woman enrolled in FFS Medicaid, FFS FAMIS, FAMIS Moms regardless of enrollment in MICC. Medicaid MCOs have their own high risk maternity programs except for SATS. SATS is different than the other expanded prenatal services in that it is “carved out” from the MCO contract and covered by DMAS for eligible women.</p> |
| How does a recipient enroll? | A physician, nurse practitioner or certified nurse midwife must initiate the referral of a pregnant woman or infant who meets at least one of the risk indicators identified on the Maternal or Infant Risk Screen (DMAS 16 or 17) and initiate a referral to a MICC provider. The care coordinator of the MICC program completes an assessment with the pregnant woman or caregiver of the infant, to see if the program is appropriate to meet the identified needs. The care coordinator will then notify DMAS of recipients who meet the eligibility criteria for MICC and upon the recipients consent, will be enrolled in MICC. |

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| <p>Provider Qualifications for MICC:</p> | <p>MICC providers may be agencies which have signed an agreement with DMAS as a BabyCare Provider.</p> <p>A care coordinator is a Registered Nurse (RN) or Social Worker (SW) employed by a qualified service provider who provides care coordination services to eligible recipients. The RN must be licensed in Virginia and should have a minimum of one year of experience in community health nursing and experience in working with pregnant women and infants. The social worker must have an M.S.W. or a B.S.W. degree and a minimum of one year of experience in a health care setting working with pregnant women and their families. The maternal and infant care coordinator is a health professional who assists recipients in accessing the health care and social service system in order to promote both physical and mental health.</p> |
| <p>Provider Qualifications for Expanded Prenatal Services:</p> | <p><u>Patient Education</u></p> <p>Providers may have courses and patient education instructors approved for Medicaid reimbursement and must enroll as a Medicaid BabyCare provider. The patient education courses that can be offered to a recipient are smoking cessation classes, childbirth classes and parenting classes. To qualify for reimbursement, a patient education instructor may complete the American Red Cross Instructor Candidate Training Course and program-specific training. Other Medicaid-approved instructor certification programs include, but are not limited to, the following: The International Childbirth Educators Association or the Richmond Childbirth Educators Association, the American Society for Psychoprophylaxes in Obstetrics, or the American Lung Association.</p> <p><u>Nutritional Services</u></p> <p>These services must be rendered by a Registered Dietitian (R.D.) or person with a masters degree in nutrition or clinical dietetics. Both require experience in public health, maternal and child nutrition or clinical dietetics.</p> <p><u>Homemaker Services</u></p> <p>Homemaker services include those services necessary to maintain household routine for pregnant and postpartum women when bed rest is necessary as ordered by a physician. Homemaker services must be rendered by an agency with a history of successful community care provisions. The homemaker agency must employ an RN or LPN who will provide supervision to the homemaker aides. The homemaker duties may be performed by a companion, homemaker, nursing assistant or home health aide.</p> <p><u>Residential and Day Treatment Substance Abuse Services</u></p> <p>Providers of substance abuse treatment services must be licensed and approved by the Department of Mental Health, Mental Retardation, and Substance Abuse Services. The requirements are captured in the Community Mental Health Rehabilitative Services Manual.</p> |